

LONG TERM EFFICACY AND COMPLIANCE WITH ONABOTULINUM TOXIN A FOR THE TREATMENT OF OVERACTIVE BLADDER SYMPTOMS

Hypothesis / aims of study

Onabotulinum toxin A is now an established therapy for the treatment of symptoms of overactive bladder. The repeated injections are effective in randomized controlled trials with high patient compliance. However, the long term results for the same in routine clinical practice are still not established. We evaluated our patients who had undergone injections 5 years ago for compliance and efficacy of this treatment.

Study design, materials and methods

This was a retrospective analysis of the case records of patients at our institution who underwent onabotulinum toxin A injections for symptoms of overactive bladder from October 2009 – September 2010 (minimum 5 years). All patients had failed treatment with conservative management and oral medications. Some patients had previously undergone anti-incontinence surgery. All had pre-injection urodynamics. The method of bladder management before and after injection along with incidence of urinary infections was noted.

Results

The patients undergoing injections for neuropathic conditions were excluded. We identified 24 patients in the non-neurogenic group during this period. The mean age was 60 years (range 30 - 83). All patients had idiopathic detrusor overactivity. Nineteen patients were voiding spontaneously and 6 were combining this with self-intermittent catheterization (SIC). A variable dose of onabotulinum toxin A was used (100U:n=3, 200U:n=14:300U:n=7).

All procedures were undertaken as a daycase. Twelve of 24 (50%) patients continue to have repeated injections and are very satisfied with the outcome. Another 7 did get benefit but have been lost to follow-up. It could not be ascertained if they are undergoing further injections at a different hospital or having an alternative treatment modality. The injections failed in the remaining 5 patients for various reasons (non efficacious: n=2, recurrent urinary infections post injections secondary to needing SIC: n=2, weakness of limb post injection:n=1). The bladder management did change post injection with 7 voiding spontaneously, 6 on SIC and remaining 6 using a combination of two methods. However, the change in bladder management did not influence the patient's decision for re-injection apart from 2 patients who suffered from infection (failures above). The mean duration of action was 8 months (range 6-12) and the mean number of injections was 7 (range 2-10).

Interpretation of results

We demonstrate that repeated injections with onabotulinum toxin A are efficacious and at least half of the patients continue to come back for further injections. These are well tolerated with no increase in morbidity over this period

Concluding message

Repeat injections with onabotulinum toxin A are efficacious and at least half of the patients continue to come back for further injections.

Disclosures

Funding: nil **Clinical Trial:** No **Subjects:** HUMAN **Ethics Committee:** University College London Hospitals **Helsinki:** Yes **Informed Consent:** Yes